

# MS STATE AND SCHOOL EMPLOYEES HEALTH INSURANCE MANAGEMENT BOARD

## Request for Proposal for Health Management Services

Supplemental Vendor Questions and Board Responses

04/29/2015

1. Given that the final vendor questions won't be answered until 4/29, and the proposal is due one week later on 5/6, would the State consider a one-week extension on the proposal due date?

*The Board does not anticipate revising the May 6, 2015 deadline for proposal submissions at this time.*

2. Section 3.2 Communication Materials/Forms states "***The HM Vendor, at its own cost, shall provide and maintain a supply of the HM Vendor's informational materials to the Board and to all departments, agencies, universities, community/junior colleges, public school districts, and public libraries (employer units) at the time of implementation and throughout the terms of the contract when requested by an employer unit.***"

- Please further define what would be considered informational materials.

*Informational materials may include, but are not necessarily limited to, brochures, flyers, or other printed material that serve to inform participants of services provided through the HM Vendor.*

- Would digital supplies/materials be acceptable?

*Digital materials may supplement, but not replace, the use of printed materials.*

- Is it acceptable to have a contact person who will supply hard copy materials upon request instead of maintaining a supply at every employer unit?

*An initial supply of printed informational materials should be supplied to each employer unit at the time of implementation followed by periodic fulfillment upon employer unit request.*

3. Section 3.18.1 addresses the requirement for four onsite wellness coaches. Please provide additional information on how the coaches currently in place work today:

**Where are these coaches currently located? Do you want the HM Vendor's coaches to keep the same locations? How big of an area do they each cover? What is the expectation in regards to travel? Is the Board open to recommendations for additional onsite coaching staff? Please provide a breakdown of population by facility location. Would the Board be interested in the HM Vendor hiring any of the current onsite coaches, assuming they meet the successful vendor's qualifications?**

*Wellness coaches serve all Plan participants throughout the state of Mississippi. Plan participants are spread across the State in all 82 counties. The HM Vendor should maintain a staff of wellness coaches that are available to conduct meetings at any employer unit in any area of the State as requested by the employer unit(s). Personnel decisions with regard to the HM Vendor's wellness coaches are the*

*responsibility of the vendor. The Board, however, does reserve the right of rejection and approval of staff assigned to the work by the HM Vendor.*

**4. Section 3.18.1 outlines the services the onsite wellness coaches will provide to participants and employer units. Please provide additional information on the following:**

○ **C. Provide on-site HRA completion support**

- i. **Please provide additional detail. Is this support expected at all locations or only those primary sites where coaches are located?**

*Onsite HRA completion support should be available and provided upon request at any of the employer units across the State.*

○ **F. Attend and provide materials at employer unit health fairs throughout the state**

- i. **How many locations hold health fairs throughout the year?**

*Employer Units may offer health fairs to their employees each year. Wellness coaches are expected to attend health fairs when requested by employer units, as scheduling permits.*

○ **H. Maintain current listing of all employer unit site champions**

- i. **Is there an existing champion network?**

*Yes.*

- ii. **Please provide details around this network (how long has it been in place, how many champions are in place total, how many locations have champions, etc.)**

*The structure has been in place for over five years. Each of the approximately 330 employers units has the responsibility for designating one or more site champions, depending on their size, number of locations, etc. Approximately 600 site champions are currently in place at approximately 500 employer unit worksites.*

○ **J. Conduct raffles, giveaways, or other activities to promote engagement at employee worksites**

- i. **Please provide additional clarification around expectations for this service.**

*The HM Vendor should have the capability to conduct raffles, giveaways, or other activities to encourage engagement in health and wellness events. An example of this type of incentive may include random drawings for giveaways based on participation at onsite coaching events.*

- ii. **Is the vendor expected to fund raffles and giveaways or just conduct them?**

*The VM Vendor is expected to fund and administer all raffles and giveaways.*

- iii. Please identify the value and types of prizes and giveaways currently distributed. For example, are prizes and giveaways t-shirts or iPads?

*Vendors should describe their service capabilities and propose their most competitive fees based on the specifications and requirements of this RFP.*

- iv. How many raffles are conducted per year? How many items are distributed as giveaways per year?

*Vendors are expected to propose activities designed to promote and engage participant behavior.*

5. Section 5.8 Disease Management Question 92 asks ***"Do you make regular recommendations regarding participant incentives for participation in disease management programs where appropriate?"*** Please clarify if you are asking about recommendations on an individual participant level or recommendations across the full population.

*Question 92 is asking if an HM Vendor makes recommendations to their clients regarding appropriate individual participant incentives that may be communicated to the population as a whole.*

6. Section 5.12 Health and Wellness Promotion Question 119 asks: ***"Describe how you administer and monitor health risk assessments. Can you administer web-based, paper, and telephone-based health risk assessments? Is there a system in place to track completion rates for each method of completion? Provide a sample of the HRA in each form you offer."*** Please identify how many individuals complete your HRA by each methodology today: online, paper, telephonically.

*In 2014 approximately 1,600 HRAs were completed with approximately 1,500 completed online, 40 on paper, and 20 telephonically.*

7. Section 5.12 Health and Wellness Promotion Question 127 asks ***"Can you cross reference claims data with the HRA results? If yes, please describe the process?"*** Please clarify what you mean by "cross referencing."

*Question 127 is asking if your system integrates HRA responses with participant's claim data.*

8. Section 5.12 Health and Wellness Promotion Question 135 asks ***"What experience do you have placing a dedicated wellness coordinator at a client? Provide a client case study of how you have done this in the past."*** Are the terms "onsite health coach" and "dedicated wellness coordinator" interchangeable in this RFP? If not, please define the role of the dedicated wellness coordinator.

*"Onsite wellness/health coach" and "dedicated wellness coordinator" may be used interchangeably in this RFP.*

9. Section 5.12 Health and Wellness Promotion Question 146 asks ***"Describe the customization available on your website including whether there can be customization at the state level, business unit level, and individual level."*** Please provide additional detail around necessary segmentation. For instance, do incentive and communication requirements vary across business units?

*Please describe your ability to customize the website specific to the Plan and its participants.*

**10. Section 3.9 Medical Case Management outlines that the HM Vendor *will provide both medical and behavioral health case management services*. Please clarify what you are looking regarding behavioral health case management.**

- **Does the Board currently carve out Behavioral Health?**

*No. Please refer to Appendix B of the RFP.*

- **Would you be interested in a carve out Behavioral Health solution? Does the Board want transitional Case Management for behavioral health?**

*The HM Vendor may make additional recommendations as part of their proposal, but must provide at a minimum, the services outlined in Section 3 – Scope of Services.*

**11. Section 3.13 Disease Management states that the *"HM Vendor will provide a disease management program for all participants including Medicare primary participants."* Please provide additional clarification.**

- **Are the Medicare primary participants on a Medicare Advantage plan?**

*This information is not maintained by the Plan. Please refer to Appendix B of the RFP for coordination of Medicare benefits.*

- **What is the goal of including Medicare primary participants in the Disease Management program?**

*The goal is the same for all participants, to improve health outcomes.*

**12. Section 4.3 Data Transfer includes the standard that *"All error transactions from the data transfer sent to the TPA will be corrected and returned to the TPA via data transfer within two (2) business days of receipt of the error report."***

- **Please define error transactions.**

*Error transactions may include, but are not limited to, missing data in the data file, a failed file transfer, and inability of the TPA to successfully retrieve the data file, and a data file transmitted to the TPA in a format that deviates from the required file layout.*

- **Please confirm that Utilization Management authorizations are the data the HM Vendor should send to the TPA.**

*Yes, all decisions the HM Vendor makes that may impact claims adjudication are to be transferred electronically to the TPA in a timely manner.*

- 13. If we have suggestions on how to improve the PGs in Section 4 Performance Standards, do we need to include that language in the Statement of Compliance?**

*Section 1.3 (6) instructs any proposer who does not agree with an item(s) in any section of the RFP to list the item(s) on the signed Statement of Compliance. Additional performance standards may be considered.*

- 14. In Section 6 Fee Schedule, please clarify if "per member per month fee" mean per member or per employee.**

*"Per member per month fee" refers to participants. Persons covered under the Plan are referred to as "participants" which includes employees, retirees, COBRA, and their dependents. In this instance "members" or "participants" are interchangeable. Your proposal for bundled fees should assume 184,000 Plan participants.*

- 15. Please provide census data with membership by zip code.**

*Please see Attachment A for participant breakdown by zip code.*

- 16. Please provide claims data for clinical analysis.**

*This information is not considered necessary for the completion of your proposal. Vendors should describe their service capabilities and propose their most competitive fees based on the specifications and requirements of this RFP.*

- 17. What is your current Case Management reach/engagement rate?**

*This information is not considered necessary for the completion of your proposal. Vendors should describe their service capabilities and propose their most competitive fees based on the specifications and requirements of this RFP.*

- 18. What percent of members with a chronic illness are identified as high risk, moderate risk and low risk? Of those, what percent are engaged telephonically?**

*This information is not considered necessary for the completion of your proposal. Vendors should describe their service capabilities and propose their most competitive fees based on the specifications and requirements of this RFP. Please refer to Appendix C of the RFP for chronic disease/condition claims experience.*

- 19. Please provide the current ROI attained, as well as a list of clinical care and utilization improvement statistics, for Disease Management and Case Management.**

*This information is not considered necessary for the completion of your proposal. Vendors should describe their service capabilities and propose their most competitive fees based on the specifications and requirements of this RFP.*

- 20. Please provide additional insight into what is working well in Case Management and Disease Management and what you would like to see improved.**

*This information is not considered necessary for the completion of your proposal. Vendors should describe their service capabilities and propose their most competitive fees based on the specifications and requirements of this RFP.*

- 21. Please provide additional information on your wellness offering. What lifestyle management programs are offered today?**

*Please refer to Appendix B of the RFP.*

- 22. Do you or will you be incenting members to participate? If so, please describe your incentive plan.**

*Please see answer to question 4.*

- 23. Of those that complete a Health Assessment, what percent participate in lifestyle modification programs? What percent of members are outreached to by a Health Coach for telephonic counseling, and what percent perform their lifestyle modification programs online?**

*This information is not available.*

- 24. What results have been achieved with your current wellness programs: risk reduction improvement, improvements in lifestyle modifications, etc.?**

*This information is not considered necessary for the completion of your proposal. Vendors should describe their service capabilities and propose their most competitive fees based on the specifications and requirements of this RFP.*

- 25. How many educational wellness events do you hold each year and at how many locations?**

*Please refer to Section 4 of the RFP.*

- 26. Do you perform biometric screenings on site each year? If so, at how many locations are they held and how many people participate?**

*No.*

- 27. Section 6 Fee Schedule #1.J: Please describe the services you envision being included in "Health Improvement Initiatives."**

*Please refer to Section 3.15 of the RFP.*

- 28. Section 6 Fee Schedule #1.M: Please describe the services you envision being included in "Wellness and Health Promotion" services.**

*Please refer to Section 3.18 of the RFP.*

- 29. Section 6 Fee Schedule #2.C: Can we use PEPM or PMPM for 24-Hour Nurseline?**

*The Board is requesting a case rate for these services.*

- 30. In Section 4 Performance Standards, page 36, the RFP states that "The standard ROI calculation of measuring prior period versus current period cost trends is not acceptable to the Board." Please describe what you would accept and what you prefer.**

*The HM Vendor is expected to propose their preferred ROI calculation methodology.*

- 31. Who is the State's current decision support vendor?**

*Truven Health Analytics, Inc.*

- 32. In Section 3.3 Data Transfers and File Maintenance #5 System Interface Costs, the RFP indicates that the HM vendor will be responsible for receiving health claim and biometric data from the TPA. Does the TPA conduct biometric screenings?**

*The TPA does not conduct biometric screenings. Healthcare providers report biometric data to the TPA through participant's wellness and/or medical claims.*

- 33. In Section 3.1 Staffing/Account Services #7, the RFP states that "The HM vendor will integrate the Plan's transparency resources in all aspects outlined in Section 3 – Scope of Services, where applicable." What is expected from the HM vendor in terms of integration?**

*The Board recently executed a contract with Castlight Health Inc. (Castlight) to provide healthcare transparency services. These transparency services assess health care providers based on cost of services or procedures, quality of outcomes, patient satisfaction, and other factors. Implementation of these services is in progress. Healthcare transparency services will be a new feature of the Plan. As such, any specific HM Vendor responsibilities regarding transparency services will be developed during the implementation process. At a minimum, the selected HM Vendor will be expected to cooperate with providers and utilize information from the transparency service and vendor.*

- 34. Section 3.3 Data Transfers and File Maintenance states that the "HM Vendor shall provide whatever information is deemed necessary by the Board." Please define what information is typically deemed necessary by the Board.**

*The information/data outlined in section 3.3 (1) through (5) of the RFP has currently been deemed necessary by the Board. This information/data is subject to change.*

- 35. Section 2 Minimum Vendor Requirements #1 States "The HM Vendor must provide services to at least one million (1,000,000) covered lives in its book of business as of January 1, 2015. Please indicate how you meet this criterion, and provide the following information for each client you list to demonstrate the proposed HM services that meet this requirement: (a) name, (b) address, (c) contact name, (d) contact title, (e) telephone number, (f) email, (g) number of covered lives, (h) scope of services provided (please be specific), (i) number of years the agreement has been in place with your organization." Please clarify whether we must list enough references until their membership totals at least 1 million lives, or can we provide data to substantiate that we have at least 1 million lives in our book of business and provide a sampling of references to demonstrate the breadth of our capabilities.**

*The HM Vendor must provide sufficient references to demonstrate services being provided to at least one million covered lives.*

- 36. What is the estimated utilization rate of the Nurseline? For example, is it anticipated that 5-10% of the population will require the 24-hour Nurseline? Is there any historical usage data that can be shared?**

*Approximately 1,200.*

- 37. Will the Board require the health risk assessment be available in paper form?**

*Yes, in order to accommodate the relatively small population of participants who do not have internet access.*

- 38. Will the Board accept proposals in which the entire document is marked confidential?**

*Please refer to section 1.3 (2) of the RFP.*